

**COUNTY COUNCIL OF THE PARTS OF LINDSEY,
LINCOLNSHIRE.**

EDUCATION COMMITTEE.


**NINTH
ANNUAL REPORT**

**OF THE
School Medical Officer.**



R. ASHLEIGH GLEGG,
M.D., D.P.H.

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Medical Inspection Sub-Committee.

Chairman—The Rev. Canon J. R. Elliott.

| | |
|------------------------|----------------------------|
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| „ H. D. Simpson | „ J. C. Greenbank |
| „ C. H. Turnor | „ T. Robinson |
| „ T. J. Blaydes | „ W. S. Watson |
| Miss Margaret Hopwood. | |

Administrative Staff.

School Medical Officer:

R. Ashleigh Glegg, M.D., D.P.H.

Permanent Medical Inspectors:

†E. E. A. Thompson Rigg, M.D., B.S.

*J. Perry Walker, M.B., Ch.B.

*James Edwin Wilson, M.D., D.P.H.

†George Samuel Levis, L.R.C.P., L.R.C.S.I., D.P.H.
(resigned).

* With H.M. Forces.

† Tuberculosis Officer and engaged in School Clinic Work.

Temporary Medical Inspectors:

M. R. J. Behrendt, L.R.C.P., L.R.C.S. (Edin.).

Alexander Fraser, M.D.

Francis J. Gordon, B.A., M.R.C.S.

H. Stanley Walker, M.D., C.M.

Joe Iredale, L.R.C.P., L.R.C.S.

Arthur Frederick Messiter, M.R.C.S., L.R.C.P.

Francis John Walker, M.D.

W. Deane, M.R.C.S., L.R.C.P.

N. Moxon, L.R.C.P., L.R.C.S.

F. P. H. Birtwhistle, M.D., Ch.B.

Nursing Staff provided by Lincolnshire Nursing Association.

Superintendent—Miss Wheeley.

Assistant „ Miss Morris.

16 whole-time Nurses and 29 District Nurses.

Clerical Staff.

Chief Clerk—Horace Lee.

Junior Clerks—W. A. Elleray.

J. R. Bee (with H.M. Forces).

H. C. May.

Chas. H. Smith.

Miss E. M. Wingrave (Temporary).

**To the Chairman and Members of the Education
Committee of the County Council of the
Parts of Lindsey, Lincolnshire.**

Madam and Gentlemen,

I have the honour to present the ninth annual report of the School Medical Officer relating to the year ending 31st December, 1916.

This is, as directed by the Board of Education, a short report of a comparatively simple nature, indicating the character and volume of the work done and the results of following up and treatment.

During the year the number of school clinics for reinspections and for the treatment of minor ailments was increased from three to six, and a considerable amount of time was devoted to the establishment of Children's Care Committees of voluntary workers. Both these agencies have been found of great and increasing practical value in securing treatment. There are many obstacles to treatment for the ailments which are shown in Table IV. as having the lowest percentage treated. These were especially adenoids and tonsils, decay of the teeth, and defective vision. In the case of the first-named, the parents very frequently object to the operation because their own doctors say that the children will "grow out of them," or because instances of bad results through inexperienced operators have come to their notice. The importance of treatment for decay of the teeth is so little understood that it only leads to waste of both doctors' and nurses' time to notify parents and follow up this defect. For defective vision there has practically been no hospital treatment available since 1914, and very few medical practitioners in the county undertake the correction of errors of refraction.

It is to be hoped that after the war the Education Committee will be able to appoint one or more surgeons and anæsthetists to operate upon enlarged tonsils and adenoids in special clinics, also a whole-time school oculist and whole-time dentists.

At the close of the year the Committee had the question of the provision of treatment under consideration, and they have since then formulated a scheme of treatment for tonsils and adenoids at existing hospitals, and for the correction of errors of refraction at clinics. This scheme has been sent to the Board of Education for approval.

The work of the school nurses has been greatly facilitated since infant health visiting has been added to their duties. It has placed them in a better relation to the parents, who look

now to them to advise them in regard to the healthy upbringing of their children. Their visits are now looked upon less as official visits of inspection and more as visits of friendly help and counsel.

I am of opinion that nurses should take the place of school attendance officers as vacancies arise, since sickness is the only valid excuse for absence from school. This would prevent overlapping of work, and would not only be in the end more economical, but would lead to greater efficiency both in attendance administration and in the measures taken to control and check illness in childhood. At present the usefulness of the school attendance officer ceases when he has ascertained that sickness is the reason for non-attendance at school. A nurse's enquiries would go further to discover the reason for sickness, with a view to its prevention, and would be able to take effective steps to secure treatment.

I have to acknowledge the hearty co-operation of school managers and teachers, of the superintendents and nurses of the Lincolnshire Nursing Association, and of the medical practitioners who have carried out, often under great strain from the pressure of other duties, the work of the whole-time school medical inspectors, who are serving in the Army. To the ladies and gentlemen who have given so much of their time voluntarily to the work of the Care Committees I beg to tender grateful thanks. The clerical staff have worked well and loyally.

I have the honour to be,

Gentlemen,

Your obedient Servant,

R. ASHLEIGH GLEGG.

Area of County and General School Statistics.

The area of the County is 963,800 acres. In it in 1916 there were 324 public elementary schools, of which 85 were provided or Council Schools and 239 non-provided. There were 380 departments. The average attendance for the year ending 31st March, 1917, was 33,164. The great majority of the schools accommodate less than 150 children.

There are 20 school attendance officers, of whom 10 give their whole time to the work.

The annual cost of school medical inspection, including the cost of school clinics for the treatment of minor ailments, was £2,453 4s. 2d. for the year ending 31st March, 1917, the annual cost per head being 1s. 5d.

Brief Account of the Work Undertaken during the Year.

INSPECTION.

The arrangements for medical inspection which were in force in the year 1915 were not changed in 1916. The medical inspectors were ten in number, all of them general medical practitioners, and five also district medical officers of health. The children examined were: (a) the Code groups, entrants and leavers, but not children of eight years of age; (b) children suspected to be physically defective presented by the teachers; and (c) children found to be defective at previous inspections.

(a) Code Groups.

9,637 children were medically examined during the year as entrants and leavers, as shown in the Table given below:—

TABLE I. (A).

| Age. | ENTRANTS. | | | | | | LEAVERS. | | | | | GRAND TOTAL. |
|-------|-----------|-----|------|------|-------------|--------|----------|-----|----|------------|--------|--------------|
| | 3 | 4 | 5 | 6 | Other Ages. | Total. | 12 | 13 | 14 | Other Age. | Total. | |
| Boys | — | 277 | 1582 | 675 | 520 | 3054 | 1363 | 206 | 2 | — | 1571 | 4625 |
| Girls | — | 245 | 1603 | 698 | 565 | 3111 | 1539 | 348 | 14 | — | 1901 | 5012 |
| Total | — | 522 | 3185 | 1373 | 1085 | 6165 | 2902 | 554 | 16 | — | 3472 | 9637 |

This is an increase of 2,859 over the corresponding number examined in 1915. Increased familiarity with the work enabled the inspectors to carry it out systematically and thoroughly, and thus they were able to accomplish completely the twice yearly inspections of urban schools and yearly inspections of rural schools, which had not previously been found possible with the staff at our disposal. The number would have been still larger but for the great addition to the number of older children employed in agriculture.

There were 559 absentees on the days of inspection, practically the same number as in 1915, generally on account of illness. 2,858 parents were present, or 400 more than in the previous year, and only 28 objections to inspection were reported.

(b) Children presented by Teachers. (Table I. (B)).

758 children, of whom 368 were boys and 390 girls were examined at the request of teachers.

(c) Defective Children Supervised.

A very large number of children were also re-inspected because they had been found defective at a previous inspection. The name of each physically defective child is entered upon a "supervision" card, with a note of the defect and of the result of following up by the school nurse. These cards are sent to the school on the day of inspection, and the children are brought before the medical inspector. A space is provided on the card for his notes at each successive inspection.

Return of Defects found in the Course of Medical Inspection.

1,405 children had no recognisable defect, and a further 1,468 had no defect except one or two (less than three) decayed teeth. Subtracting these from the total examined, namely, 9,637, there were 6,764 or 70 per cent. defective children.

The defects which, leaving out uncleanness, numbered 13,346, are set out in the Board of Education Table II. below, but may be summarised thus:—

| | | | | | |
|--|-----|-----|-----|-----|--------|
| Malnutrition | ... | ... | ... | ... | 13 |
| Carious Teeth | ... | ... | ... | ... | 6561 |
| Disease or Defect of the Nose and Throat | | | | | 3004 |
| Disease of the Eye and Defects of Vision | | | | | 1394 |
| „ „ Ear and Defects of Hearing | | | | | 629 |
| „ „ Heart and Circulation | ... | | | | 285 |
| „ „ Lungs | ... | ... | ... | | 233 |
| „ „ Nervous System | ... | ... | ... | | 34 |
| „ „ Skin | ... | ... | ... | | 85 |
| Mentally Defective | ... | ... | ... | | 35 |
| Infectious Diseases | ... | ... | ... | | 22 |
| Rickets | ... | ... | ... | ... | 34 |
| Deformities | ... | ... | ... | ... | 158 |
| Tuberculosis (Non-Pulmonary) | ... | ... | ... | ... | 26 |
| Other Diseases | ... | ... | ... | ... | 833 |
| | | | | | <hr/> |
| | | | | | 13,346 |
| | | | | | <hr/> |

It is satisfactory that so few cases of malnutrition are recorded, but it must be noted that the number included in the table as malnourished are only the children whose nutrition was classed by the inspectors as bad. If the children classed by them as below the average in nutrition be added the number would be increased to 634.

In Table II. the Board of Education require the return of defects found in the course of medical inspection both of Code groups and specials to be recorded in two columns, one giving the number referred for treatment and the other the number requiring to be kept under observation but not referred for treatment. As no column is given for children whose defects are either very slight, such as vision $\frac{6}{9}$ instead of $\frac{6}{6}$, and defects of speech such as lalling in entrants, or irremediable such as scars of burns and congenital defects such as coloboma of the iris of the eye, it has been necessary to include these cases in the second column, but they are not as a matter of fact kept under observation for such defects.

Following Up and After-Care of Defective Children

The nursing staff is provided by the Lincolnshire Nursing Association. It consisted in 1916 of a superintendent and an assistant-superintendent with 16 nurses, doing County Council work only in large districts, and 29 nurses employed by District Nursing Associations, who undertake County Council nursing, in addition to sick nursing, in their comparatively small areas.

All the whole-time nurses and most of the district nurses undertake school nursing, tuberculosis visiting and infant health visiting.

As no scheme of treatment was in force in 1916, the results of following up are much the same as in the previous year. About 42 per cent. of the cases received treatment, and a further 3 per cent. are noted as having improved without treatment.

As the question of the value of the services of district nurses for school nursing and other forms of County Council work is often questioned, I may say that the experience in this county has been that so far as school nursing is concerned, the average results of their work have been equal to those of the whole-timers. Eleven of the 33 have had three years' training, and a number of those not so well trained are women whose personality makes for success in this work. They are very efficiently supervised in this county by superintendents who are keenly interested in health visiting, including in that term all forms of County Council nursing. I do not believe, however, that their employment in this work would be a success without this somewhat intensive supervision.

The nurses paid 11,838 visits to follow up 5,334 defects.

The whole-time nurses followed up 3,769 defects, making 8,714 visits, and the district nurses followed up the remaining 1,565 defects, making 3,124 visits.

The details of the defects treated are given in the Board of Education Table IV. It is to be noted that the number of cases of skin disease include more than were found by the medical inspectors. All cases of skin disease reported by the Head Teachers were notified to the nurses for their supervision, and they have not been kept separate in their record from the cases reported at the time of medical inspection.

In regard to decay of the teeth, the medical inspectors have been instructed to draw the attention of parents to this condition only when suppuration of the gum is present, as the possibility of obtaining treatment of a satisfactory character is practically non-existent in the county. This accounts for the small number of cases shown in the Treatment Table. As a matter of fact the records show that at least 70 per cent. of the children require treatment for decay of the teeth.

Nurses Inspections for Pediculosis.

To complete the survey of the work of the nurses, a statement is given here of their findings as a result of the routine inspection of school children for pediculosis. These inspections are not carried out at the time of the medical inspectors' visits, but are made independently. Two main inspections a year are made to each school, but a large number of additional visits have to be made both to the schools and homes to follow up and secure the cleansing of verminous children.

28,510 children were examined by the nurses. Of these 24,365 were clean, 2,566 or 9.56 per cent. had slight evidence of pediculosis, and 1,579 or 5.54 per cent. had many nits in the hair. Full particulars of the procedure adopted to enforce cleanliness have been given in previous reports.

Seven parents were notified to the Education Committee for prosecution under the school attendance bye-laws for irregular attendance of children, owing to the fact that they had to be excluded from school for pediculosis, the exclusion being the result of the parents' neglect of warning and instruction. Three of these were fined, one 1s., and two 2s. 6d. each, and the remaining cases were withdrawn.

Children's Care Committees.

A considerable amount of the School Medical Officer's time was devoted in 1916 to encouraging the formation of voluntary Care Committees, and instructing them in the scope of their work. To co-ordinate them and assist them financially and otherwise an Association was formed, the Lindsey Child Welfare Association, on the Executive Committee of which there are two representatives from each of the Children's Care Committees in the county.

TABLE II. (BOARD OF EDUCATION).
Return of Defects found in the course of Medical Inspection.

| DEFECT. | | | | CODE GROUPS. | | SPECIALS. | |
|-------------------------------|------|-----|-----|-----------------------------|--|-----------------------------|--|
| | | | | No. referred for treatment. | Number requiring to be kept under observation, but not referred for treatment. | No. referred for treatment. | No. required to be kept under observation. |
| Malnutrition | ... | ... | ... | — | 13 | 1 | 4 |
| UNCLEANLINESS. | | | | | | | |
| Head | ... | ... | ... | — | 407 | 8 | 2 |
| Body | ... | ... | ... | 7 | 314 | 3 | 7 |
| SKIN. | | | | | | | |
| Ringworm | Head | ... | ... | 21 | — | 13 | — |
| | Body | ... | ... | 1 | — | — | — |
| Scabies | ... | ... | ... | 13 | — | 13 | — |
| Impetigo | ... | ... | ... | 23 | — | 8 | — |
| Other Disease | ... | ... | ... | 27 | — | 7 | 1 |
| EYE. | | | | | | | |
| Defective Vision and Squint | ... | ... | ... | 651 | 662 | 159 | 20 |
| External Eye Disease | ... | ... | ... | 51 | 30 | 20 | 5 |
| EAR. | | | | | | | |
| Defective Hearing | ... | ... | ... | 109 | 109 | 16 | 6 |
| Ear Disease | ... | ... | ... | 129 | 391 | 13 | 5 |
| TEETH. | | | | | | | |
| Dental Disease | ... | ... | ... | — | — | — | — |
| NOSE & THROAT. | | | | | | | |
| Enlarged Tonsils | ... | ... | ... | 443 | 1549 | 46 | 19 |
| Adenoids | ... | ... | ... | 52 | 350 | 37 | 15 |
| Enlarged Tonsils and Adenoids | ... | ... | ... | 610 | — | 37 | — |
| Defective Speech | ... | ... | ... | 1 | 287 | — | 3 |
| HEART & CIRCULATION. | | | | | | | |
| HEART DISEASE. | | | | | | | |
| Organic | ... | ... | ... | 13 | — | — | 2 |
| Functional | ... | ... | ... | 16 | 60 | — | 8 |
| Anæmia... | ... | ... | ... | 67 | 129 | 6 | 14 |
| LUNGS. | | | | | | | |
| PULMONARY TUBERCULOSIS. | | | | | | | |
| Definite | ... | ... | ... | 23 | — | 17 | 1 |
| Suspected | ... | ... | ... | 43 | 79 | 18 | 24 |
| Chronic Bronchitis | ... | ... | ... | 7 | 81 | — | 4 |
| Other Disease | ... | ... | ... | — | — | 1 | 3 |
| NERVOUS SYSTEM. | | | | | | | |
| Epilepsy | ... | ... | ... | 1 | 11 | 1 | 1 |
| Chorea | ... | ... | ... | — | 6 | 3 | 2 |
| Other Disease | ... | ... | ... | — | 16 | — | 9 |
| NON-PULMONARY TUBERCULOSIS. | | | | | | | |
| Glands | ... | ... | ... | 23 | — | 2 | 1 |
| Bones and Joints | ... | ... | ... | — | 3 | 2 | — |
| Other Forms | ... | ... | ... | — | — | 2 | — |
| Rickets | ... | ... | ... | 6 | 28 | — | 1 |
| Deformities | ... | ... | ... | 3 | 155 | 2 | 10 |
| Other Defects or Diseases | ... | ... | ... | 182 | 651 | 14 | 85 |

TABLE IV.—(BOARD OF EDUCATION). TREATMENT OF DEFECTS OF CHILDREN DURING 1916

| CONDITION. | No. of defects found for which treatment was considered necessary. | | | No. of defects for which no report is available, | No. of defects treated. | Results of Treatment. | | | No. of defects not treated. | Percentage of defects treated. |
|---------------------------|--|------|--------|--|-------------------------|-----------------------|-----------|------------|-----------------------------|--------------------------------|
| | From previous year. | New. | Total. | | | Remedied. | Improved. | Unchanged. | | |
| Clothing | 18 | — | 18 | — | 17 | 12 | 5 | — | 1 | 94.44 |
| Footgear | 62 | — | 62 | — | 53 | 40 | 13 | — | 9 | 85.48 |
| Cleanliness of Head ... | 4 | — | 4 | — | 4 | — | 4 | — | — | 100. |
| Cleanliness of Body ... | — | 7 | 7 | — | 7 | 7 | — | — | — | 100. |
| Nutrition | 28 | — | 28 | — | 23 | — | 20 | 3 | 5 | 82.14 |
| Nose and Throat | 906 | 1105 | 2011 | — | 429 | 394 | 14 | 21 | 1582 | 21.33 |
| External Eye Disease ... | 59 | 51 | 110 | — | 84 | 44 | 34 | 6 | 26 | 76.36 |
| Ear Disease... .. | 46 | 129 | 175 | — | 90 | 52 | 28 | 10 | 85 | 51.43 |
| Teeth | 222 | — | 222 | — | 83 | 65 | 16 | 2 | 139 | 37.34 |
| Heart and Circulation ... | 64 | 96 | 160 | — | 96 | 31 | 54 | 11 | 64 | 60.0 |
| Lungs... .. | 101 | 73 | 174 | — | 140 | 27 | 106 | 7 | 34 | 80.46 |
| Nervous System... .. | 6 | 1 | 7 | — | 2 | 1 | 1 | — | 5 | 28.57 |
| Skin | 158 | 502 | 660 | — | 537 | 432 | 93 | 12 | 123 | 81.36 |
| Rickets | 1 | 6 | 7 | — | 1 | — | 1 | — | 6 | 14.28 |
| Deformities | 8 | 3 | 11 | — | 5 | 4 | 1 | — | 6 | 47.27 |
| Tuberculosis— | | | | | | | | | | |
| Non-Pulmonary | 35 | 23 | 58 | — | 29 | 12 | 11 | 6 | 29 | 50.0 |
| Speech... .. | 1 | 1 | 2 | — | 1 | — | 1 | — | 1 | 50.0 |
| Mental Condition | 18 | — | 18 | — | 5 | — | — | 5 | 13 | 27.77 |
| Vision and Squint | 568 | 651 | 1219 | — | 440 | 416 | 15 | 9 | 779 | 36.09 |
| Hearing | 33 | 109 | 142 | — | 77 | 62 | 12 | 3 | 65 | 54.22 |
| Miscellaneous | 57 | 182 | 239 | — | 111 | 67 | 37 | 7 | 128 | 46.86 |
| TOTAL | 2395 | 2939 | 5334 | — | 2234 | 1666 | 466 | 102 | 3100 | 41.88 |

At the end of 1916 there were six Committees in the market towns and surrounding villages, at Gainsborough, Cleethorpes, Horncastle, Louth, Market Rasen, and Scunthorpe, and since then Committees have been formed at Barton-on-Humber and Spilsby.

At Gainsborough, Horncastle, Market Rasen and Louth, the Committees established infant welfare centres, and such centres are also being started at Barton and Spilsby. At Cleethorpes and Scunthorpe infant welfare centres were already provided by other agencies.

All the Committees follow up school cases referred to them by the nurses when these have failed to obtain treatment for them.

At Louth and Gainsborough arrangements by the Committees were made for operations for tonsils and adenoids, and one or two Committees provided milk at the schools and tonic foods, such as Virol and cod liver oil with malt extract for cases of malnutrition. Their work has proved to be of great value, and it is being extended.

The Gainsborough and Scunthorpe Committees urged the Education Committee to make provision for the treatment of tonsils and adenoids, defects of vision, and decay of the teeth. This the Committee took into consideration, and after the close of the year, resolved to bring in a measure of treatment for the first two conditions, leaving dental treatment until experience has been gained of the administration of a treatment scheme.

School Clinics.

School Clinics for the treatment of minor ailments and for re-inspections were already established at the beginning of 1916 in three centres, namely, Cleethorpes, Louth and Scunthorpe. During the year three more were added, at Brigg, Horncastle, and Market Rasen. All are now conducted in special premises taken by the County Council for the purpose in each town.

Clinics are required for Barton-on-Humber, Gainsborough, Little Coates, and Spilsby.

In the clinics established in the smaller towns the number of children in attendance averaged about 50, and in the larger towns 200 in the year. The conditions treated were chiefly the contagious skin diseases which were rapidly cured, and the children thus were got back to school much more quickly than was formerly the case. Children with chronic inflammatory ear discharges and inflammation of the eyes were amongst the other cases treated. For more serious conditions the parents were advised to consult their own doctors.

The School Attendance Officers are able to bring children urging ill-health as excuse for non-attendance at school to the school clinics, when there is a doubt of the genuineness of the excuse.

Control of Infectious Diseases.

All cases occurring amongst school children are notified by the Head Teachers to the School Medical Officer. Copies of these notifications are transmitted immediately to the district medical officers of health for investigation. There were 395 cases of measles, compared with 1,768 cases in 1915, a decrease of nearly 1,300 cases. Ten schools or departments were closed on account of this disease. There were 824 notifications of whooping cough, 307 more than in the previous year. Twenty schools were closed on account of outbreaks of whooping cough during the year under review.

Altogether 2,886 notifications of infectious disease were received, namely, in addition to the above 138 cases of scarlet fever, 204 of diphtheria, 529 of chicken pox, 193 of mumps, 6 of German measles, 226 of ringworm, 290 of impetigo, and 81 of scabies.

The table given below sets out the details of the cases notified by the school teachers in each month during 1916.

| Month. | No. of Exclusions on account of in- fection in the home. | Scarlet Fever. | Diphtheria. | Measles. | Whooping Cough. | Chicken Pox. | Mumps. | German Measles. | Ringworm. | Impetigo. | Scabies. | Total Infectious Diseases. |
|---------------|--|----------------|-------------|----------|-----------------|--------------|--------|-----------------|-----------|-----------|----------|-------------------------------|
| January ... | 59 | 16 | 9 | 28 | 55 | 72 | 32 | — | 19 | 26 | 5 | 262 |
| February ... | 141 | 26 | 49 | 51 | 55 | 44 | 28 | 2 | 27 | 22 | — | 304 |
| March ... | 104 | 14 | 30 | 119 | 117 | 109 | 34 | — | 40 | 32 | 17 | 512 |
| April ... | 84 | 6 | 7 | 51 | 27 | 18 | 12 | — | 10 | 11 | 2 | 144 |
| May ... | 211 | 12 | 27 | 36 | 173 | 54 | 29 | — | 31 | 39 | 6 | 407 |
| June ... | 215 | 1 | 33 | 12 | 149 | 75 | 29 | 2 | 23 | 18 | 4 | 346 |
| July ... | 196 | 11 | 11 | 9 | 114 | 21 | 2 | — | 27 | 23 | 4 | 222 |
| August ... | 66 | 4 | 13 | 7 | 49 | 25 | 2 | — | 9 | 10 | 1 | 120 |
| September ... | 60 | 22 | 8 | 26 | 29 | 6 | 6 | 1 | 6 | 13 | 2 | 119 |
| October ... | 62 | 8 | 7 | 3 | 27 | 1 | 7 | — | 15 | 58 | 8 | 134 |
| November ... | 103 | 12 | 10 | 22 | 16 | 46 | 5 | — | 8 | 27 | 27 | 173 |
| December ... | 52 | 6 | — | 31 | 13 | 58 | 7 | 1 | 11 | 11 | 5 | 143 |
| Total ... | 1353 | 138 | 204 | 395 | 824 | 529 | 193 | 6 | 226 | 290 | 81 | 2886 |

171 swabs were sent to the County Laboratory by medical practitioners in the county, to prove that children who had suffered from diphtheria were free from infection. Of these 11 were found to contain diphtheria bacilli, and 160 were negative. Thirty swabs were received for diagnosis, of which 10 showed diphtheria to be present, and 20 did not.

Certificates authorising the return of children to school who have had diphtheria are issued when swabs sent at the conclusion of illness are found to be negative.

LIST OF CLOSURES.

| Reason for Closure. | Schools or Departments. | Closures by District Medical Officers. | Closures by School Medical Officer. |
|---------------------|-------------------------|--|-------------------------------------|
| Measles | 10 | 3 | 7 |
| Scarlet Fever ... | 8 | 7 | 1 |
| Diphtheria | 5 | 1 | 4 |
| Whooping Cough ... | 20 | 4 | 16 |
| Chicken Pox... .. | 5 | — | 5 |
| Influenza | 1 | — | 1 |
| Mumps | 1 | — | 1 |
| Disinfection | 1 | 1 | — |
| Sore Throat | 1 | — | 1 |
| Total | 52 | 16 | 36 |

School Premises.

No new school buildings were erected during 1916.

The managers of the Brumby and Frodingham School have notified the Education Committee that they have improved the ventilation and drainage of their school, and changed their latrines to the water carriage system.

Other Activities of the School Medical Service.

OPEN-AIR EDUCATION.

Four boys and four girls were sent from various parts of the county to the Worcestershire Residential Open-Air School at West Malvern, in 1916.

Eleven boys and four girls were also sent during the year to the West Kirby Open-Air School.

All the children showed distinct improvement, both physically and mentally, the most marked benefit being shown by those who were sent to the Worcestershire School.

More rest is insisted upon during the day at that school, which, there is little doubt, was the main reason for the difference in the results.

There is great need for open-air schools at Cleethorpes, Gainsborough, Louth and Scunthorpe.

Special Schools.

At the end of 1916, special education for the blind was being given to one child, and special education for the deaf to 12 children, in both cases in residential schools outside the county.

Examination of Scholarship Candidates, Pupil Teachers and Teachers.

One hundred and twenty-two pupil teachers, candidates for pupil-teachership, bursars and student teachers were medically inspected by myself or other members of the medical staff during the year. Seventy-four who were of good physique were passed unconditionally, while 45 were passed after satisfactory reports had been received as to treatment for various defects. Of these 32 required treatment for dental caries, nine for defective eyesight, three for physical defects, one for dental caries and defective eyesight. Two pupil teachers were rejected owing to delicacy of the lungs, as was also one candidate on account of her anæmic condition.
